02/15/2007 11:43 FAX 9086547866 Ø 002/003 LDLKM PART B - FEE(S) TRANSMITTAL Complete and send this form, therether with applicable fee(s), to: Mall Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 FEB 1 5 2007 or Fax (571)-273-2885 INSTRUCTIONS: The form should be used for appropriate. All further crespondence design indicated unless corrected and other maintenance fee notifications. Afor transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where ding the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Uso Block 1 for any change of address) 66151 7590 11/16/2006 Certificate of Mailing or Transmission DAVID PETER KRIVOSHIK, ESQ. I hereby certify that this Foo(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being feesimile transmitted to the USPTO (571) 273-2885, on the date indicated below 113 WERTSVILLE ROAD RINGOES, NJ 08551-1108 02/15/2007 FMETEKI2 00000105 121095 09894181 01 FC:2501 700.00 DA (Date 02 FC: 1504 300,00 DO 03 FC: 800 APPLICATION 9000 DA 300.00 DA PILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/894,181 06/28/2001 Frank J. Ponzio JR. SYMBOL 3.0-001 5315 TITLE OF INVENTION: SYSTEM AND METHOD FOR SIGNALING QUALITY AND INTEGRITY OF DATA CONTENT APPLN, TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE No yes nonprovisional _SI460 700 **\$300** SO \$1700 02/16/2007 1000 EXAMINER ART UNIT CLASS-SUBCLASS WANG, LIANG CHE A 709-217000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list LERNER, DAVID, LITTENBERG, the names of up to 3 registered patent attorneys or agents OR, alternatively, Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 2KRUMHOLZ & MENTLIK, LLP (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. □ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

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